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PTO/SB/01 (10-00)

Under the Paperwi	tent and Trademark C	or use through 10/31/2002. ON office; U.S. DEPARTMENT OF less it contains a valid OMB co	COMMERCE				
	LARATION		Attorney Docket Number		END 882NP		
	AND OF ATTORNEY		First Named Inventor R		Randall S. Hickle et	Randall S. Hickle et al.	
	LITY OR DESIGN		COMPLETE IF KNOWN				
	CFR 1.63)		Application Number		10/660,201		
Declaration Submitted with Initial Filing	OR Initial Filing (Su	Surcharge	Filing Date		September 11, 2003		
	(37 CFR 1.16(e)		Group Art U	nit	Not yet assigned		
			Examiner Na	ame	Not yet assigned		
As a below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
DRUG DELIVERY SYSTEM AND METHOD (Title of the Invention)							
the specification of which							
[X] is attached hereto							
OR							
[ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number							
and was amended on (MM/DD/YYYY)							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application	Country		Filing Date D/YYYY)	Priority Not Claime		d?	
Number(s)					YES	NO.	
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							



## **DECLARATION - Utility or Design Patent Application** I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. Application Number(s) Filing Date (MM/DD/YYYY) Additional provisional application numbers are listed on a supplemental priority data sheet 60/411,077 September 16, 2002 PTO/SB/02B attached hereto. I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application: **Application Serial No.** Filing Date **Status** Pending I hereby appoint: Place Customer Practitioners at Customer Number 000027777 Number Bar Code Label Here AND Practitioner(s) named below: Registration Number Name as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Address all telephone calls to Verne E. Kreger, Jr. at telephone number (513) 337-3295. **Customer Number** Direct all correspondence to: or Bar Code Label 000027777 OR ☐ Correspondence address below Name: Address: Address: City: ZIP State: Country Telephone: Fax:

by declare that all statements made herein of my own knowledge are true and that all statements made on fromation and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name Randall S. **Family Name** Hickle (first and middle [if any]) or Surname Inventor's < 155ep03 Signature Country USA Citizenship USA Residence: City Lubbock State TX **Mailing Address** 2404 Topeka Avenue ZIP City Lubbock State TX 79407 Country USA I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor **Family Name** Given Name Michael Gustafson (first and middle (if any)) or Surname Inventor's Signature Date State OH Country USA Residence: City Citizenship USA Cincinnati **Mailing Address** 10344 Stable Hand Drive ZIP State OH 45242 Country Cincinnati, I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF THIRD INVENTOR: ☐ A petition has been filed for this unsigned inventor **Given Name Family Name** or Surname (first and middle [if any]) Inventor's Signature Date Residence: City State Country Citizenship **Mailing Address** 

State

City

ZIP

Country